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P. O. BOX 1135 CHICAGO, IL 60690-1135 12/03/2004 MIGIUFER 20000085 021818 03864972 01 FC:1504 9.00 D 3 FC:1501 40.00 D 1330.00 D 3 FC:1501 APPLICATION NO. FILING DATE FIRST NAMED INVENTIOR APPLICATION NO. FILING DATE FIRST NAMED INVENTIOR DORSELY OF STANDEN FIRST NAMED INVENTIOR APPLICATION DIAGNOSTIC BLOWN FUSE INDICATOR  FRANCE APPLICATION TO STANDEN FIRST NAMED INVENTIOR APPLICATION FILE TO AL FEE(S) DUE DATE DUE TO AL FEE(S) DUE TO ALL FEE(S)		·	any change of address)	PA	Fee(s) Transmittal. The papers. Each additional	is certificate cannot be used al paper, such as an assignn	I for any other accompanying nent or formal drawing, must		
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APPLICATION NO.   FILING DATE   FIRST NAMED INVENTOR   ATTORNEY DOCKET NO.   CONFIRMATION NO.   697864.972   05/25/2001   Dan Stanek   0112690-045   3436			E.	. E.	Heather Fos	ter	(Depositor's name)		
APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 99864.972 05.75/2001 Dan Stanek 0112690-045 3436  TITLE OF INVENTION: DIAGNOSTIC BLOWN FUSE INDICATOR  APPLN. TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1330 \$200 \$1630 11/30/2004  EXAMINER ART UNIT CLASS-SUBCLASS VORTMAN, ANATOLY 2835 337-206000  I. Change of correspondence address or indication of "Fee Address" (37 CPR 1.659). Change of correspondence address (or Change of Correspondence Address for indication of "Fee Address" indication form WTO/SH47, Rev 0.02 or more recent) statched. Use of a Costomer Number is required.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If no name is identified below, the document has been filed recordation as set forth in 37 CPR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Please check the appropriate assignce category or categories (will not be printed on the patent): Individual Corporation or other private group entity Geovern 4 of Copies and Advance Order - # of Copies 3  Advance Order - # of Copies 3  Advance Order - # of Copies 3  A payment by credit card. From PTO-2038 is attached.  The following fee(s) are enclosed: A payment of Fee(s): A check in the amount of the fee(s) is enclosed.  Payment by credit card. From PTO-2038 is attached.  Payment by credit card. From PTO-2038 is attached.  The policent caims SMALL ENTITY status. See 37 CFR 1.27 Deposit Account Number 102. Bl 8 were the required fee(s), or credit any overpaymer personal cardinal payment of Fee(s): Payment of Fee(s): A payment of Fee(s): Payment	02 FC:8001	9.00 OP	OF TRA	DEMARK	1 Junt	M .	(Signature)		
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EXAMINER  ART UNIT  CLASS-SUBCLASS  337-206000  1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.53).  Change of correspondence address (or Change of Correspondence Address (indication (or "Fee Address" Indication form PTO/SB1/22) attached.  The Change of correspondence Address (or Change of Correspondence Address (indication (or "Fee Address" Indication form PTO/SB1/22) attached.  The Change of correspondence Address (or Change of Change of Correspondence Address (or Change of Change of Correspondence Address (or Change of Change of Change of Correspondence Address (or Change of Change of Change of Change of Correspondence Address (or Change of Change of Change of Correspondence (or Change of Change of Change of Correspondence (or Change of Change o	APPLN. TYPE	SMALL ENTITY	ISSUE FI	EE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE		
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PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filter recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual Corporation or other private group entity Government of Fee(s):  A check in the amount of the fee(s) is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized by charge the required fee(s), or credit any overpayment peposit Account Number 02-1818 (enclose an extra copy of this form).  S. Change in Entity Status (from status indicated above)  A a Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.  NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other par interest as shown by the records of the United States Patent and Trademark Office.  Patricia Kane Schmidt	CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is					
Please check the appropriate assignee category or categories (will not be printed on the patent):	PLEASE NOTE: Unles recordation as set forth i	s an assignee is identified be n 37 CFR 3.11. Completion	elow, no assignee of this form is NO	data will appear on Γ a substitute for fil	the patent. If an assigning an assignment.		document has been filed for		
Please check the appropriate assignce category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government of Fee(s) are enclosed:  4b. Payment of Fee(s):  A check in the amount of the fee(s) is enclosed.  Publication Fee (No small entity discount permitted)  Advance Order - # of Copies  The Director is hereby authorized by charge the required fee(s), or credit any overpayment opensit Account Number  Deposit Account Number  1 b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).  The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.  NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other par interest as shown by the records of the United States Patent and Trademark Office.  November 30, 2004	(A) NAME OF ASSIGN	NEE	(В	) RESIDENCE: (C	ITY and STATE OR CO	UNTRY)			
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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).  The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other par interest as shown by the records of the United States Patent and Trademark Office.  Authorized Signature			<u></u>				or credit any overpayment, to copy of this form).		
Authorized Signature Date November 30, 2004	TT.			b. Applicant is	no longer claiming SMA	LL ENTITY status. See 37	CFR 1.27(g)(2).		
Patricia Kane Schmidt	The Director of the USPTO NOTE: The Issue Fee and I interest as shown by the rec	is requested to apply the Iss Publication Fee (if required) cords of the United States Pat	ue Fee and Publicat will not be accepted ent and Trademark	tion Fee (if any) or I from anyone other Office.	to re-apply any previous than the applicant; a reg	ly paid issue fee to the appli istered attorney or agent; or	cation identified above. the assignee or other party in		
Patricia Kane Schmidt Typed or printed name Registration No. 46,446	Authorized Signature	4 Aschmie	DT -		DateN	lovember 30, 200	)4		
	Typed or printed name		chmidt		Registration	No. 46,446			

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Dan Stanek, et al.

Appl. No.:

09/864,972

Filed:

May 25, 2001

Title:

DIAGNOSTIC BLOWN FUSE INDICATOR

Art Unit:

2835

Examiner:

**Anatoly Vortman** 

Docket No.:

112690-045

Mail Stop

Commissioner for Patents

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Alexandria, VA 22313-1450

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- 2. Part B—Fee(s) Transmittal (duplicate)
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- 4. Return Receipt Postcard.

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on November 30, 2004.

Respectfully submitted,

BELL, BOYD & LLOYD LLC

Heather Foster

Name of Person Mailing Correspondence

Signature

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TRANSMIT		Docket No. 112690-045			
Applicant(s): Dan S	(37 C. J. 1.311) Stanek, et al.				······································
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